## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

John M. BRITTINGHAM et al.

Appl. No.: 10/758,274

Confirmation No.: 5137

Filed: January 16, 2004

For: Intradermal Cellular Delivery Using

Narrow Gauge Micro-Cannula

Art Unit: 1642

Examiner: To Be Assigned

Atty. Docket No.: 07767-200246

Customer No.: 26694

PATENT TRADEMARK OFFICE

## PETITION REGARDING ALLEGEDLY OMITTED DRAWINGS

Mail Stop: Petitions
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

The Notice of Missing Parts dated April 26, 2004 contained an item stating that Figures 8 and 9 appeared to have been omitted from the application as filed. Applicants respectfully submit that Figures 8 and 9 were filed with the application, as evidenced by a copy of the complete figures as filed and date stamped receipt accompanying this paper.

Applicants petition to have the Notice of Omitted Items be withdrawn, and the \$130 petition fee that is included in this filing refunded.

A petition fee of \$130.00 is included herewith, as required by 37 CFR 1.17(h). Please charge that fee if missing and/or any additional fees that may be required, and credit any refunds to our Deposit Account No. 22-0261 and notify the undersigned.

06/29/2004 LWONDIM1 00000023 10758274

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130.00 OP

Applicants: John M. BRITTINGHAM et al.

Appl. No. 10/758,274

Respectfully submitted,

Date: 6/25/04

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## Ann S. Hobbs, Ph.D. LEST AVAILABLE CO January 16, 2004 PNO Due Date: Date Filed: January 16, 2004 **TM Official Gazette Date:** Atty. Docket No: 7767-200246 Re: Brittingham et al. **Application No:** Filing Date: January 16, 2004 Patent No.: Issue Date: Trademark: Trademark Reg. No: ition/Cancellation No:

The following items were received from Venable, Washington, D.C., by the U.S. Patent & Trademark Office:

	U.S. PTO FEES ENCLOSED
Transmittal Letter '	Filing Fee
Fee Transmittal Letter  New U.S. Utility Application (25 pages of specification/claims)	
New 0.3. Junty Application (25 pages of specification/claims)   Specification (25 pages of specification/claims)   Specification (25 pages of specification/claims)	Surcharge Fee
Invention Declaration	Additional Claim Fee
U.S. National Stage Application of PCT Application	- Additional Glaim Fee
Translation of International Application	Recordation/Indexing Fee
New U.S. TM Application ( specimens)	
Rule 53(d) Continued Prosecution Application Substitute Specification	IDS Fee
Rule 53(b) Continuation or Divisional Application (attach copy of specification,	
claims, drawings & declaration)	Extension Fee
Priority Document-Cert. Copy of Appln.#: ; Country	EXOLOGIT CC
Date Filed:	Notice of Appeal Fee
Request for Continued Examination (RCE) under 37 CFR 1.114	
Request for Reconsideration Application Data Sheet	Brief on Appeal Fee
Assignment w/Cover Sheet	Oral Hearing Request Fee
IDS w/ PTO SB/08 a/k/a PTO Form-1449 ( references)	Oral Fleating Request Fee
Response	Petition Fee
Amendment/ Preliminary Amendment	<del></del>
Petition/Request for Extension of Time (one mo. ext.) Notice of Appeal	Issue Fee
Appeal Brief (in triplicate)	Dublication For
□ Reply Brief (in triplicate)/ □ Request for Oral Hearing	Publication Fee
Can Canada and the state of the	Maintenance Fee
Confirmation of Hearing Petition	
Certificate of Correction  Maintenance Fee Transmittal	TM Statement of Use
Maintenance Fee Transmittal Power of Attorney Response to Notice to File Missing Parts	8 Affidavit Fee
Response to Notice to File Missing Parts	o Allidavit Fee
Response to Notice to File Missing Requirements	8 and 15 Affidavit
Response to Restriction Requirement	
Petition to Revive	TM Renewal Application Fee
Sequence Listing – CDR Enclosed?  Yes No Status Inquiry	Nation of Operation E
Request for Non-Publication	Notice of Opposition Fee
Request to Rescind Non-Publication Request	TM Extension of Time Fee
Terminal Disclaimer	
TM Statement of Use	
Extension of Time ( mo. ext.)  Declaration Under 8	
Declaration Under 8 and 15	
TM Renewal Application	
Notice of Opposition (Please list all documents in Other section)	
Amendment to Alleged Use	
Other: (Please describe below)	
	Total Fore Daid
	Total Fees Paid
	Check Number Attached
	Charge Deposit Account No. 22-0261*
*If the Deposit Account was used, was a copy of this form sent to Accounting?	Yes No